PTO/SB/17 (05-07)
Approved for use through 05/31/2007. OMB 0851-0032

Under the Paperwork Reduction Act of	1995, no person are required to	respond to a collection		ion unless it displays		3 control numbe
Effective on 12/08	Complete if Known					
Fees pursuant to the Consolidated Approp	Application Nun			10/650,918-Conf. #7977		
FEE TRANS	Filing Date		August 29, 2003			
For FY 20		Named Inventor Yasushi IKEDA				
1011120	Examiner Name G. E. Webb		G. E. Webb			
Applicant claims small entity status. See 37 CFR 1.27		Art Unit 1751		1751		
TOTAL AMOUNT OF PAYMENT	(\$) 120.00	Attorney Docket No. 0425-1076P		0425-1076P		
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify):						
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
X Charge any additional fee(s) or underpayments of X Credit any overpayments						
fee(s) under 37 CFR 1.16 and 1.17						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES					
FI		ARCH FEES	EXAMI	NATION FEES		
Application Type Fee (\$	Small Entity) Fee (\$) Fee (Small Entity See (\$)	Fee (\$)	Small Entity Fee (\$)	Foor	Paid (\$)
Utility 300	150 500		200	100	1 003	r and (4)
Design 200	100 100		130	65		
Plant 200	100 300		160	80		
Reissue 300	150 500		600	300		
Provisional 200	100 0		000			
	100 0	U	U	0		
2. EXCESS CLAIM FEES				Fee (\$)	Small Entity Fee (\$)	
Fee Description Each claim over 20 (including Reiss				50	25	
Each independent claim over 3 (including Reissues)					200	100
Multiple dependent claims					360	180
Total Claims Extra Claims	Fee (\$) Fee	Paid (\$)	M	ultiple Depende		
6 -20 x = Fee (\$)					Fee Paid (
HP = highest number of total claims peid for, if greater than 20.						
Indep. Claims Extra Claims	Fee (\$) Fee	Paid (\$)	_			_
1						
HP = highest number of independent claims	paid for, if greater than 3.					
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50						
sheets or fraction thereof. See 3	ne application size tee di	ue is \$250 (\$125 f	or small e	ntity) for each ac	dditional 5	0
Total Sheets Extra Sheet		additional 50 or frac	en de	f Fee (\$)	Eee	Paid (\$)
	/50 =				100	raiu (#)
4. OTHER FEE(S)		. (^	Fees	Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)						raiu (e)
Other (e.g., late filling surcharge): 1251 Extension for response within first month						20.00
SUBMITTED BY \						
1		Registration No.	20.004	1		
Signature & W		(Attorney/Agent)	32,881	Telephone	,	
Name (Print/Type) John W. Bailey				Date	June 5,	, 2007
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